For Office Use Only
☐ Date Rec'd
☐ Birth Certificate
Physical Exam
Immunizations
☐ Dental (K)
☐ Family Interview



## **COMMUNITY CHRISTIAN SCHOOL**

2406 9½ Avenue South Fort Dodge, IA 50501 Phone: (515) 573-3011 Fax: (515) 573-5425 ccsoffice@mchsi.com

ccsfd.org

	Last	First	Middle	Goes By
Start Date		Entering Grade		
STUDENT RECC	ORD INFORMATION			
Name of School to o	btain student's records			
Address				
City		State	e	Zip
Phone		Fax		
STUDENT ACAL	DEMIC INFORMATION	N.		
		no If yes, what is / was the ne	ed?	
	•	·		
Has the student beer	n involved in any special si	upplemental program (speech, Title 1, c	other)? ves no	If ves Please explain:
	, oposisi o			you,ouco oxp.u
Are there any other a	areas of concern about lea	rning?		
		J		
Has the student ever	r heen retained in a grade?	yes no if yes eynis	ain·	
Has the student ever	r been retained in a grade?	yes no If yes, expla	ain:	
Has the student ever	r been retained in a grade?	yes no If yes, expla	ain:	
	r been retained in a grade?		ain:	
STUDENT BEHA	AVIOR INFORMATION			
STUDENT BEHA	AVIOR INFORMATION	l		
STUDENT BEHA	AVIOR INFORMATION	l		
STUDENT BEHA Has the student ever	AVIOR INFORMATION r had discipline problems in	l	es, explain	
STUDENT BEHA Has the student ever	AVIOR INFORMATION r had discipline problems in	n school? yes no If ye	es, explain	
STUDENT BEHA Has the student ever	AVIOR INFORMATION r had discipline problems in	n school? yes no If ye	es, explain	

We are interested in teaching and training children academically, emotionally, physically, and spiritually here at CCS. We are looking forward to the possibility of serving your student and family.

TO BE COMPLETED BY PARENT/GUARDIAN		
Please explain why you wish to enroll your student in CCS?		
Parent/Guardian Signature	Date	
TO BE COMPLETED BY STUDENT (7th & 8th only)		
Please explain why you wish to attend CCS?		
Tiodoc oxplain why you man to allong occ.		
Student Signature	Date	
ITEMS FOR SCHOOL OFFICE		
Required items to be turned in to the school office prior to the start of classes:  ALL completed CCS application forms		
Birth Certificate Physical Exam (signature of health provider require) Certificate of Immunizations (signature of health provider require)		
Certificate of Immunizations (signature of health provider require) Certificate of Dental Screening (Kindergarten ONLY)		

Once we have received the completed CCS application forms and the new family information forms, a family interview will be scheduled with the Dean of Students. Within two weeks of your interview you will be notified of the status of your student's enrollment at CCS.